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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE ** SMALL ENTITY **
 GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after conditions met Allowance Verified and <u> </u> Acknowledged Examiner's Signature Initials	STATE OR COUNTRY MN	SHEETS DRAWING 5	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
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